

# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

Total Number of Pages in This Submission

Application Number	10/596,867
Filing Date	June 28, 2006
First Named Inventor	David A. Fish
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	32350-253564

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input checked="" type="checkbox"/> Statement Under 37 CFR 3.73(b) <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>- Yellow Filing Receipt</b>
<input type="checkbox"/> Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	VENABLE LLP		
Signature			
Printed name	Raymond J. Ho		
Date	June 12, 2008	Reg. No.	41,838

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 0.00

Complete if Known	
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## METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number:	22-0261	Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	310	155	510	255	210	105
Design	210	105	100	50	130	65
Plant	210	105	310	155	160	80
Reissue	310	155	510	255	620	310
Provisional	210	105	0	0	0	0

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)	Fee (\$)	Fee (\$)
Each independent claim over 3 (including Reissues)	Fee (\$)	Fee (\$)
Multiple dependent claims	Fee (\$)	Fee (\$)

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee (\$)
13	- 20 =	x	=	HP = highest number of total claims paid for, if greater than 20.	50	25

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 3 =	x	=	HP = highest number of independent claims paid for, if greater than 3.	210	105	370

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x	=	

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

SUBMITTED BY	Signature	Registration No. (Attorney/Agent)	Telephone
Name (Print/Type)	Raymond J. Ho	41,838	(703) 760-1977
		Date	June 12, 2008

Venable Filing Number

Atty. Docket No: 32350-253564

Title of Application: ELECTROLUMINESCENT DISPLAY DEVICES AND ACTIVE MATRIX

Application No: 10/596,867

Patent No. :

Attorney/LAA:

RJH/srj

PTO Due Date:

June 12, 2008

Current Date:

Filing Date:

June 28, 2006

Issue Date:

The following items were received from Venable LLP, Washington, D.C., by the U.S. Patent & Trademark Office on the date stamped hereon:

**U.S. PTO FEES ENCLOSED**

Transmittal Letter PTO/SB/21

Fee Transmittal Letter PTO/SB/17

New U.S. Patent Application

(       pages of specification/claims)

Rule 53(d) Continued Prosecution Application

Rule 53(b) Continuation or Divisional Application

*(attach copy of specification, claims, drawings and declaration)*

U.S. National Stage Application of PCT Application

Request for Continued Examination (RCE) under 37 CFR 1.114

Application Data Sheet

Substitute Specification

Priority Document-Cert. Copy of  
Appln.#: \_\_\_\_\_; Country: \_\_\_\_\_; Date Filed: \_\_\_\_\_

Formal Drawings (       sheets, Figs.)

Inventor Declaration

Assignment w/Cover Sheet

Response to Notice to File Missing Parts

Response to Notice to File Missing Requirements

Response to Requirement

Information Disclosure Statement with cited references

Response

Amendment / Preliminary Amendment

Petition/Request for Extension of Time ( mo. ext.)

Revocation and Power of Attorney

Statement Under 37 CFR 3.73(b)

Yellow Filing Receipt

Request for Non-Publication

Request to Rescind Non-Publication Request

Terminal Disclaimer

Notice of Appeal

Appeal Brief (*in triplicate*) / Reply Brief (*in triplicate*)

Request for Oral Hearing

Confirmation of Hearing Petition

Issue Fee Transmittal

Certificate of Correction

Maintenance Fee Transmittal

Status Inquiry

Other: (*Please describe below*)

Filing Fee

Search Fee

Examination Fee

Additional Claim Fee

Extension Fee

IDS Fee

Recordation Fee

Notice of Appeal Fee

Brief on Appeal

Oral Hearing Request Fee

Petition Fee

Issue Fee

Publication Fee

Certificate of Correction Fee

Maintenance Fee

Other Fees (Describe)

**0.00      Total Fees Paid**

Charge the above fees as follows:

USPTO Deposit Account No. 22-0261

USPTO Deposit Account No. \_\_\_\_\_

USPTO not to charge any Deposit Account

Reviewed By:

Signature of Attorney

Date

6/12/08